PTO/SB/06 (08-03)
Approved for use through 7/31/2006. OMB 0651-0032
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Substitute for Form PTO-875								10/7/4811		
CLAIMS AS FILED PART I (Column 1) (Column 2)						SMALL	SMALL ENTITY		OTHER THAN SMALL ENTITY	
	FOR	NUMBI	NUMBER FILED		NUMBER EXTRA		FEE		RATE	FEE
	SIC FEE CFR 1.18(a))				*		s	OR		s
	AL CLAIMS CFR 1.16(c))		minus 20			x s=		OR	x s =	
	EPENDENT CLAII CFR 1.16(b))	MS	minus 3 =			x \$_ =		OR	x \$	
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.18(d))					+5 =	 	OR	^ V		
* If the difference in column 1 is less than zero, enter "0" in column 2.						TOTAL		OR	+\$=	
CLAIMS AS AMENDED - PART II										
2	-2-01	(Column 1)		(Column 2)	(Column 3)	SMALL	ENTITY	OR		ENTITY
NT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE	·	RATE	ADDI- TIONAL
ME	Total (37 CFR 1.18(c))	. 57	Minus	57		x \$ =	1		x \$ =	FEE
AMENDMENT	Independent (37 CFR 1.16(b))	6	Minus	" 10	-	x s=		OR OR	x s =	
AM	FIRST PRESENT	TATION OF MULTIPL	E DEPENDS	ENT CLAIM (37 CF	-R 1.16(d))			OR		
. / /						+s =	1		+s=	
8/19/67					ADD'L FEE		OR .	ADD'L FEE	<u> </u>	
٣	<i>/////////////////////////////////////</i>	(Column 1) CLAIMS		(Column 2) HIGHEST	(Column 3)] .	· · · · · ·	•
ENT B		REMAINING AFTER AMENDMENT		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE .	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
ENDMENT	Total (37 CFR 1.16(c))	24	Minus	" 57	" /	x s=		OR	x s =	
Ē	Independent (37 CFR 1.16(b))	. 3	Minus	" 6		x s=		OR	X \$ =	
AM	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.18(d))					+s =		OR	+5 =	
						TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	
(Column 1) (Column 2) (Column 3)							·			
၁		CLAIMS REMAINING		HIGHEST NUMBER	PRESENT	5475	4001	Ī	0.75	
ENT	-	AFTER AMENDMENT		PREVIOUSLY PAID FOR	EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
<u>≅</u>	Total (37 CFR 1.18(c))	• .	Minus	••		x \$=		OR	x \$=	
AMEN	Independent (37 CFR 1.16(b))	•	Minus	***	=	x \$=		OR	X \$=	
A	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					+s_=		OR	+ s =	
TOTAL ADD'L FEE								OR	TOTAL ADD'L FEE	
1	" If the "Highest I	olumn 1 is less tha Number Previously	Paid For	IN THIS SPACE	is less than 20	3. enter *20*				
"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". "" If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3". The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate how in column 1.										

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.